

**FRANKLIN COUNTY  
ON-PREMISE SIGN PERMIT APPLICATION**

**280 EAST BROAD STREET  
COLUMBUS OHIO 43215  
TEL: 614-462-3095  
FAX: 614-462-7155**

Application # \_\_\_\_\_  
Date Filed \_\_\_\_\_  
Receipt # \_\_\_\_\_

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**I. JOB LOCATION** (type or print all information)

Job Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Township \_\_\_\_\_ Zoning District \_\_\_\_\_  
District/Parcel# \_\_\_\_\_  
Name of Establishment \_\_\_\_\_  
Applicant's Name \_\_\_\_\_ Agent \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_

Site Location of Subject Tract

a). If site is vacant

The site is located on the (circle one) NSEW side of \_\_\_\_\_  
Approximately \_\_\_\_\_ feet (circle one) NSEW of \_\_\_\_\_

**II. BUILDING**

Multiple Height \_\_\_\_\_ X Width \_\_\_\_\_ = Area \_\_\_\_\_ sq.ft.  
Square Root Area \_\_\_\_\_ X Mass Factor \_\_\_\_\_ = Allowable Area

**III. SIGN**

Setback of Sign \_\_\_\_\_ No. of Facings \_\_\_\_\_ Face Area \_\_\_\_\_  
Height to Top of Sign \_\_\_\_\_ Clearance \_\_\_\_\_

**TYPE OF GRAPHIC**

Ground _____	Temporary Sign	Yes	No
Wall _____	Illuminated Sign	Yes	No
Roof _____			

**IV. LOCATION CHARACTERISTICS**

Street R.O.W. \_\_\_\_\_ Speed Limit of Street \_\_\_\_\_  
Number of Lanes \_\_\_\_\_

V. DESCRIPTION OF THE PROPOSED GRAPHIC  
TO INSTALL

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ATTACH TWO (2) SETS OF SITE PLANS INDICATING LOCATION OF SIGN,  
ELEVATION AND CROSS SECTIONS SHOWING CONSTRUCTION AND  
ANCHORAGE AS REQUIRED BY THE FRANKLIN COUNTY ZONING  
RESOLUTION.

-----**DO NOT WRITE BELOW THIS LINE**-----

Conditions Placed on Sign Permit:

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Notice: On the basis of the information stated above, a Sign Permit is hereby  
approved ( ) denied ( ) on the date \_\_\_\_\_.

Zoning Officer \_\_\_\_\_

*Construction must be started within (6) months from date of issuance of sign permit or  
permit shall become VOID.*